

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CLUB FOR GROWTH ACTION

ADDRESS (number and street)

2001 L ST NW STE 600

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00487470

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
11 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
11 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chris Chocola

Signature of Treasurer

Chris Chocola

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
12 17 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CLUB FOR GROWTH ACTION

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
11 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">421701.16</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">1375194.65</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">56927.28</span>	<span style="border: 1px solid black; padding: 2px;">2221650.30</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1432121.93</span>	<span style="border: 1px solid black; padding: 2px;">2643351.46</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">19970.55</span>	<span style="border: 1px solid black; padding: 2px;">1231200.08</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">1412151.38</span>	<span style="border: 1px solid black; padding: 2px;">1412151.38</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CLUB FOR GROWTH ACTION

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
11	/	01	/	2013

To:

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2013

**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

55926.39

2116907.39

(ii) Unitemized .....

1000.89

95524.91

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

56927.28

2212432.30

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

56927.28

2212432.30

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

9218.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

56927.28

2221650.30

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

56927.28

2221650.30

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	12772.33	250098.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	12772.33	250098.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	7198.22	781001.74
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	200100.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19970.55	1231200.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19970.55	1231200.08

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	56927.28	2212432.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	200100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	56927.28	2012332.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	12772.33	250098.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9218.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	12772.33	240880.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

## **A. Duane Alton**

Mailing Address 712 N Lancashire Ln

City State Zip Code  
 Liberty Lake WA 99019-8531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n.a.

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 26 / 2013

Transaction ID : SA11AI.42522

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Karl D. Buus**

Mailing Address 35562 Teja Court

City State Zip Code  
 Yucaipa CA 92399-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 04 / 2013

Transaction ID : SA11AI.42514

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **C. Citizens Club for Gr Citizens Club for Growth, Inc.**

Mailing Address 2001 L St., NW, Ste. 675

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44551.39

Date of Receipt

11 / 25 / 2013

Transaction ID : SA11AI.42546

Amount of Each Receipt this Period

44551.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44876.39

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

## **A. Wilbert Ferguson**

Mailing Address 55 Wayside Ln

City

Verona

State

PA

Zip Code

15147-3859

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self employed

Occupation

retired/investor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 21 / 2013

Transaction ID : SA11AI.42487

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. David L. Fogel**

Mailing Address 470 Mine Hill Road

City

Fairfield

State

CT

Zip Code

06824-2151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IndexIQ

Occupation

Private Equity

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 06 / 2013

Transaction ID : SA11AI.42484

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Tom Forster**

Mailing Address 8101 Connecticut Ave Apt S600

City

Chevy Chase

State

MD

Zip Code

20815-2849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

na

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 26 / 2013

Transaction ID : SA11AI.42489

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Alan Fortini-Campbell**

Mailing Address 2302 Harrison Street

City State Zip Code  
 Evanston IL 60201-2146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 The Fortini-Campbell Company

Occupation  
 Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 04 / 2013

Transaction ID : SA11AI.42499

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Robert Paul Fulkerson**

Mailing Address 11200 Perrin Beitel Rd. Apt. 705

City State Zip Code  
 San Antonio TX 78217-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Self

Occupation  
 oil/gas/real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 05 / 2013

Transaction ID : SA11AI.42504

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Vernon M. Mattsen**

Mailing Address 13855 Terrace Road Northeast

City State Zip Code  
 Ham Lake MN 55304-6742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 n.a.

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 06 / 2013

Transaction ID : SA11AI.42498

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1700.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

A. Greg McNece

Mailing Address P.O. Box 1830

City

Davis

State

CA

Zip Code

95617-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Davisville Properties Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 05 / 2013

Transaction ID : SA11AI.42518

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Greg McNece

Mailing Address P.O. Box 1830

City

Davis

State

CA

Zip Code

95617-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Davisville Properties Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 08 / 2013

Transaction ID : SA11AI.42519

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Greg McNece

Mailing Address P.O. Box 1830

City

Davis

State

CA

Zip Code

95617-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Davisville Properties Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 21 / 2013

Transaction ID : SA11AI.42520

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. James Powell**

Mailing Address 301 West Beauregard Avenue Suite 2

City State Zip Code  
 San Angelo TX 76903-6370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Rancher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : SA11AI.42502**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Lenora Hall Pusta**

Mailing Address 138 West Sunflower Drive

City State Zip Code  
 Payson AZ 85541-6152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

n/a

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : SA11AI.42510**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Barry Putegnat**

Mailing Address 7650 Padre Island Highway # A

City State Zip Code  
 Brownsville TX 78521-3451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Service Industrial Inc.

Co-Owner/President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : SA11AI.42505**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Michael E. Reif**

Mailing Address 100 Club Drive Suite 122

City State Zip Code  
Burnsville NC 28714-3182

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 19 / 2013

Transaction ID : SA11AI.42491

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Allen C. Shepard Jr.**

Mailing Address 2375 Jackson Street

City State Zip Code  
San Francisco CA 94115-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 05 / 2013

Transaction ID : SA11AI.42517

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Allen H. Simon**

Mailing Address 1383 N Criss St

City State Zip Code  
Chandler AZ 85226-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n.a.

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 23 / 2013

Transaction ID : SA11AI.42509

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Andrew Sullivan**

Mailing Address 7748 Western Avenue

City State Zip Code  
Omaha NE 68114-1760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marriott International

Occupation

tech support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2013

Transaction ID : SA11AI.42500

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Jacob Turner**

Mailing Address 455 North Palm Drive Apt. 3

City State Zip Code  
Beverly Hills CA 90210-4894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Prospect Medical Holdings Inc.

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 21 / 2013

Transaction ID : SA11AI.42512

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Donald E. Tykeson**

Mailing Address 1144 Willagillespie Road #33

City State Zip Code  
Eugene OR 97401-6722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tykeson / Associates Enterprises

Occupation

Private Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 01 / 2013

Transaction ID : SA11AI.42521

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 30  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Dean Zarras**

Mailing Address 12 Old Logging Road

City Bedford State NY Zip Code 10506-1625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SESCO Enterprises LLC

Occupation  
CTO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 01 / 2013

Transaction ID : SA11AI.42486

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

55926.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 30

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Authorize.Net**

Mailing Address 808 East Utah Valley Drive

City American Fork      State UT      Zip Code 84003

Purpose of Disbursement  
credit card processing fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2013
**Transaction ID : SB21B.42523**

Amount of Each Disbursement this Period

89.95

Full Name (Last, First, Middle Initial)

**B. Avalanche Services**

Mailing Address 113 McGarry Blvd.

City Kearneysville      State WV      Zip Code 25430

Purpose of Disbursement  
mail production costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.42552**

Amount of Each Disbursement this Period

1490.00

Full Name (Last, First, Middle Initial)

**C. Big Eye Direct**

Mailing Address PO Box 710865

City Oak Hill      State VA      Zip Code 20171

Purpose of Disbursement  
mail production costs, postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 08 / 2013
**Transaction ID : SB21B.42526**

Amount of Each Disbursement this Period

263.30

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1843.25

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CLUB FOR GROWTH ACTION

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 30

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Club for Growth**

Mailing Address 2001 L St., NW, Ste. 600

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
pull from advance for operating expenditure Line 21

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 15 / 2013
**Transaction ID : SB21B.42555**

Amount of Each Disbursement this Period

-1549.55

Full Name (Last, First, Middle Initial)

**B. Club for Growth**

Mailing Address 2001 L St., NW, Ste. 600

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
pull from advance for I.E. Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.42567**

Amount of Each Disbursement this Period

-136.34

Full Name (Last, First, Middle Initial)

**C. Club for Growth**

Mailing Address 2001 L St., NW, Ste. 600

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
pull from advance for I.E. Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.42573**

Amount of Each Disbursement this Period

-82.89

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-1768.78



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 30

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CLUB FOR GROWTH ACTION**

Full Name (Last, First, Middle Initial)

**A. Club for Growth**

Mailing Address 2001 L St., NW, Ste. 600

City Washington      State DC      Zip Code 20036

Purpose of Disbursement  
Pull from advance, line 21, for administrative, compliance, fundraising support

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 29 / 2013
**Transaction ID : SB21B.42554**

Amount of Each Disbursement this Period

5355.90

Full Name (Last, First, Middle Initial)

**B. Club for Growth**

Mailing Address 2001 L St., NW, Ste. 600

City Washington      State DC      Zip Code 20036

Purpose of Disbursement  
pull from advance for operating expenditure Line 21

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 29 / 2013
**Transaction ID : SB21B.42556**

Amount of Each Disbursement this Period

-5355.90

Full Name (Last, First, Middle Initial)

**C. Red Sea, LLC**
Mailing Address 4550 Montgomery Ave.  
#906

City Bethesda      State MD      Zip Code 20814

Purpose of Disbursement  
general strategy consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2013
**Transaction ID : SB21B.42524**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CLUB FOR GROWTH ACTION

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CLUB FOR GROWTH ACTION

### A. Sun Trust Bank

Category/  
Type

22.29

State:  District:

### B. Wiley Rein, LLC

Category/  
Type

287.50

State:  District:

**C. Wiley Rein, LLC**

Category/  
Type

2679.50

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

2989.29

12754.69

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Bask Digital Media, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2013         </div>
Mailing Address 1953 San Elijo Ave. Ste. 205		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5000.00         </div>
City State Zip Code Cardiff-by-the-Sea CA 92007		
Purpose of Expenditure internet ads, website maintenance	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">525448.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>

Full Name (Last, First, Middle Initial) of Payee <b>Bask Digital Media, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 25 / 2013         </div>
Mailing Address 1953 San Elijo Ave. Ste. 205		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           300.00         </div>
City State Zip Code Cardiff-by-the-Sea CA 92007		
Purpose of Expenditure website maintenance	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">526908.95</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         5300.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         5300.00       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Big Eye Direct</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            11 / 22 / 2013         </div>	
Mailing Address PO Box 710865		Amount <div style="border: 1px solid black; padding: 2px;">           619.22         </div>	
City Oak Hill	State VA		
Purpose of Expenditure mail production costs, postage	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">526472.61</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE.42563

Full Name (Last, First, Middle Initial) of Payee <b>Big Eye Direct</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            11 / 22 / 2013         </div>	
Mailing Address PO Box 710865		Amount <div style="border: 1px solid black; padding: 2px;">           376.49         </div>	
City Oak Hill	State VA		
Purpose of Expenditure mail production costs, postage	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: CHRIS MCDANIEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">244388.88</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE.42571

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">           995.71         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">                     </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">                     </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 22 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Club for Growth</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 01 / 2013</b>	
Mailing Address 2001 L St., NW, Ste. 600		Amount <span style="border: 1px solid black; padding: 2px;">128.26</span>	
City Washington	State DC	Zip Code 20036	<b>Transaction ID : SE.42558</b> Office Sought: <input type="checkbox"/> House State: <u>AR</u> <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure internet ads, wesite maintenance (from advance line 21)		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">525576.26</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Club for Growth</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 22 / 2013</b>	
Mailing Address 2001 L St., NW, Ste. 600		Amount <span style="border: 1px solid black; padding: 2px;">136.34</span>	
City Washington	State DC	Zip Code 20036	<b>Transaction ID : SE.42564</b> Office Sought: <input type="checkbox"/> House State: <u>AR</u> <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure mail production costs (from advance line 21)		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">526608.95</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">264.60</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
**12 / 17 / 2013**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 23 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00487470         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Club for Growth</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>	
Mailing Address 2001 L St., NW, Ste. 600		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           82.89         </div>	
City Washington State DC Zip Code 20036	Transaction ID : <b>SE.42572</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MS District: 00
Purpose of Expenditure mail production costs (from advance line 21) Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: CHRIS MCDANIEL		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought		2014 <input type="checkbox"/> Other (specify)	
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           244471.77         </div>			

Full Name (Last, First, Middle Initial) of Payee <b>DK Designs</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>	
Mailing Address 906 Promenade Lane		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           12.50         </div>	
City Mount Airy State MD Zip Code 21771	Transaction ID : <b>SE.42561</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: 00
Purpose of Expenditure mail production costs Category/Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought		2014 <input type="checkbox"/> Other (specify)	
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           525853.39         </div>			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         95.39       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         95.39       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Signature

Date

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 24 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>DK Designs</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           11 / 22 / 2013         </div>
Mailing Address 906 Promenade Lane		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           7.60         </div>
City Mount Airy	State MD	
Purpose of Expenditure mail production costs	Category/ Type	Office Sought: <input type="checkbox"/> House    State: MS <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRIS MCDANIEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block;">           244012.39         </div>		

Transaction ID : SE.42570

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           11 / 01 / 2013         </div>
Mailing Address 6416 10th St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10.94         </div>
City Alexandria	State VA	
Purpose of Expenditure website maintenance	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: OR <input type="checkbox"/> Senate    District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GREGORY P MR. WALDEN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block;">           492.53         </div>		

Transaction ID : SE.42532

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         18.54       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         18.54       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Signature

Date

12 / 17 / 2013



Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount 10.94	
City Alexandria	State VA	Zip Code 22307	Transaction ID : SE.42535
Purpose of Expenditure website maintenance	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: ADAM KINZINGER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought	955.48	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	21.88
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 26 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount 10.94	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 11	
Name of Federal Candidate Supported or Opposed by Expenditure: ERIC ALAN RICK CRAWFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount 10.94	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03	
Name of Federal Candidate Supported or Opposed by Expenditure: FRANK D. LUCAS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	21.88
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

Signature

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Date

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 12 / 17 / 2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 27 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount <span style="border: 1px solid black; padding: 2px;">10.94</span>	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 04 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN MCCARTY PALAZZO		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">955.48</span>			

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount <span style="border: 1px solid black; padding: 2px;">10.94</span>	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MARTHA ROBY		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">955.48</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">21.88</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Date

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 12 / 17 / 2013

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 28 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount <span style="border: 1px solid black; padding: 2px;">10.94</span>	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY D BUCSHON		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">955.48</span>			

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2013	
Mailing Address 6416 10th St.		Amount <span style="border: 1px solid black; padding: 2px;">10.94</span>	
City Alexandria	State VA		
Purpose of Expenditure website maintenance	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">955.48</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">21.88</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Date

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 12 / 17 / 2013

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 29 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>FatLab, LLC</b>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2013         </div>	
Mailing Address 6416 10th St.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10.94         </div>	
City Alexandria	State VA	Zip Code 22307	<b>Transaction ID : SE.42542</b>	
Purpose of Expenditure website maintenance	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: AARON JON MR. SCHOCK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee <b>Strive Communications</b>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 22 / 2013         </div>	
Mailing Address 11921 Freedom Dr. Ste. 550			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           264.63         </div>	
City Reston	State VA	Zip Code 20190	<b>Transaction ID : SE.42560</b>	
Purpose of Expenditure mail production costs	Category/ Type	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	275.57
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Date

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 12 / 17 / 2013

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 30 OF 30  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00487470       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Strive Communications</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 22 / 2013</b>	
Mailing Address 11921 Freedom Dr. Ste. 550		Amount <span style="border: 1px solid black; padding: 2px;">160.89</span>	
City Reston	State VA	Zip Code 20190	<b>Transaction ID : SE.42569</b> Office Sought: <input type="checkbox"/> House State: <b>MS</b> <input checked="" type="checkbox"/> Senate District: <b>00</b> <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure mail production costs		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>CHRIS MCDANIEL</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">244004.79</span>			

Full Name (Last, First, Middle Initial) of Payee		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;"> </span>	
City	State	Zip Code	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">160.89</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">7198.22</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

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Date

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**12 / 17 / 2013**

Signature